FILED

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90043 029 ***150.00

CR2E034 (11/98)

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	MENT # P9600 IN Name AMI, INC.	0017781								1 8 18
Principal Place of Business Mailing Address							E FAGISADE ING FOLSO BISSE OBJET ODDIE HOTTE HOTTE		(88) (499)	1010111811001
13491 SW 99 TERR MIAMI FL 33186		13491 SW 99 TERR MIAMI FL 33186					DO NOT WRITE IN THE	S SP	ACE	
						3.	Date Incorporated or Qualifed 02/27/1996			
2. Principal P	Place of Business	2a. Mailing Address				4.	FEI Number			plied For
21		26					<u>65-0648712</u>			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc				5.	Certificate of Status Desired		Fee Re	
City & Sta	City & State	L State			6.	Election Campaign Financing Trust Fund Contribution	11			
Zip	Country Zip			Country 30			This corporation owes the current year I Personal Property Tax.			□No _
9 Name and Address of Current Registered Agent						10.	Name and Address of New Registere	d Age	ent	
MIA 11. Pursuant	91 SW 99 TERR MI FL 33186 I to the provisions of Sections 607 0 registered agent, or both, in the Staum familiar with, and accept the obli	te of Florida. Such change was	s authorize	d by	City e-named cor the corporat	rporatio tion's bo	n submits this statement for the purpose pard of directors. I hereby accept the app	L of cha	B5 Zip C anging its ent as reg	registered
SIGNATURE Signaturie, typed or printed name of registered agent and title if anythicable NOTE Registered					nt eignature requir	red when	remstating) DATE			į
				13.			ADDITIONS/CHANGES TO OFFICERS A	ND I	JIRECT O	RS IN 12
NAME STREET ADORESS	P DELETE GANEM, NANCY A 13491 SW 99 TERR MIAMI FL 33186			: 1 TITLE : 2 NAME 1 3 STREET ADDRESS 1.4 CITY-ST-ZIP] Change	☐ Addition
CITY-ST-ZIP	T	☐ DELETE	2;T						Change	☐ Addition
NAME	GANEM, ELIAS A		22 N							
STREET ADDRESS	1		h		TADDRESS					
CITY-ST-ZIP	MIAMI FL 33186	☐ DELETE			ST-ZIP				Change	Addition
THE	Detere			3.1 TITLE 3.2 NAME				-		/
NAME			1		TANDORES					
				3.3 STREET ADDRESS 3.4 CITY-ST-ZIP						
CITY-ST-ZIP TITLE		□ DELETE	417		21-21-			Г	Change	Addition .
NAME			lt	NAME				_	=	}

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

4 3 STREET ADDRESS

4.4 CITY - ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5 1 TITLE

52 NAME 5.3 STREET ADDRESS

6 1 TITLE

6.2 NAME

DELETE

☐ DELETE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIF

TITLE

NAME

SIGNATURE: Jamy 1 - AFRICASIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Change

☐ Change

Addition

Addition